Atty. Dkt. No. 047711-0221





IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Ronald J. Lebel et al.

Title:

AMBULATORY MEDICAL APPARATUS WITH HAND HELD COMMUNICATION

DEVICE

Appl. No.:

09/768,196

Filing Date:

1/22/2001

Examiner:

Matthew F. Desanto

Art Unit:

3763

I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450.

EV 420554441 US April 29, 2004

(Express Mail Label Number) (Date of Deposit)

Jose Ramos

(Printed Name)

AMENDMENT TRANSMITTAL

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TECHNOLOGY CENTER 3700

Mail Stop AF
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

- [] Small Entity status under 37 C.F.R. § 1.9 and § 1.27 has been established by a previous assertion of Small Entity status.
- [] Assertion of Small Entity status is enclosed.
- [X] The fee required for additional claims is calculated below:

| | Claims As Amended | | Previously Paid For | • | Extra Claims Present | | Rate | | Additional Claims Fee |
|---------------------|----------------------|------|---------------------|------|----------------------|----|----------|---|--------------------------|
| Total Claims: | 23 | - | 23 | _ | 0 | X | \$18.00 | = | \$0.00 |
| Independent Claims: | 1 | - | 3 | = | 0 | X | \$86.00 | = | \$0.00 |
| First | presentation | of a | ny Multiple | Depe | endent Claims: | + | \$290.00 | = | \$0.00 |
| | | | | | CLAIMS | FE | E TOTAL | = | \$0.00 |

| [|] | Applicant hereby petitions for an extension of time under 3 total number of months checked below: | 7 C.F.R. §1.136(a) fo | or the | | | | |
|--|------|--|---|--|--|--|--|--|
| [|] | Extension for response filed within the first month: | \$110.00 | \$0.00 | | | | |
| [|] | Extension for response filed within the second month: | \$420.00 | \$0.00 | | | | |
| [|] | Extension for response filed within the third month: | \$950.00 | \$0.00 | | | | |
| . [|] | Extension for response filed within the fourth month: | \$1,480.00 | \$0.00 | | | | |
| [|] | Extension for response filed within the fifth month: | \$2,010.00 | \$0.00 | | | | |
| | | EXTENSION | FEE TOTAL: | \$0.00 | | | | |
| [|] | Statutory Disclaimer Fee under 37 C.F.R. 1.20(d): | \$110.00 | \$0.00 | | | | |
| | | CLAIMS, EXTENSION AND DISCLAIMER | R FEE TOTAL: | \$0.00 | | | | |
| [|] | Small Entity Fees Apply (subtraction) | ct ½ of above): | \$0.00 | | | | |
| | | | TOTAL FEE: | \$0.00 | | | | |
| [[X | | A check in the amount of \$0.00 is enclosed. The Commissioner is hereby authorized to charge any addit required regarding this application under 37 C.F.R. §§ 1.16 overpayment, to Deposit Account No. 06-1447. Should no herewith, as by a check being in the wrong amount, unsigned improper or informal or even entirely missing, the Commist the unpaid amount to Deposit Account No. 06-1447. If any for timely acceptance of papers submitted herewith, applicate extension under 37 C.F.R. §1.136 and authorizes payment of Deposit Account No. 06-1447. | proper payment be ented, post-dated, otherwisioner is authorized to extensions of time at the hereby petitions for any such extension | nclosed vise o charge re needed or such s fees to | | | | |
| ind | icat | Please direct all correspondence to the undersigned attorney ted below. | or agent at the addre | ess | | | | |
| Dat | | | ubmitted. | | | | | |
| | | Y & LARDNER LLP ner Number: 23392 Attorney for A | | , • | | | | |
| Customer Number: 23392 Attorney for Applicant Telephone: (310) 975-7963 Registration No. 32,933 | | | | | | | | |
| | - | nile: (310) 557-8475 | <u>-</u> ,,,,,, | | | | | |